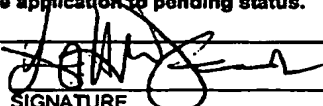


U.S. APPLICATION NO. (If known, see 37 CFR 1.51) 107517898		INTERNATIONAL APPLICATION NO. PCT/US2002/018780		ATTORNEY DOCKET NUMBER 14014.0410U1	
21. <input checked="" type="checkbox"/> The following fees are submitted: <input checked="" type="checkbox"/> a) Basic national fee \$300.00 <input checked="" type="checkbox"/> b) Examination fee \$200.00 <input checked="" type="checkbox"/> c) Search fee \$500.00				CALCULATIONS	
				PTO USE ONLY	
TOTAL OF ABOVE CALCULATIONS =				\$1000.00	
<input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.					
Total Sheets	Extra Sheets	No. of each additional 50 or fraction thereof (round up to a whole number)	RATE		
44 - 100 =	0 / 50 =		X 250.00	0.00	
Surcharge of \$130.00 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 CFR 1.492(e)).				\$ 130.00	
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE		
Total claims	47 - 20 =	27	X \$50.00	\$1,350.00	
Independent claims	6 - 3 =	3	X \$200.00	\$600.00	
MULTIPLE DEPENDENT CLAIM(S) (if applicable)			+ \$360.00	\$0.00	
TOTAL OF ABOVE CALCULATIONS =				\$3,080.00	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2.				\$3,080.00	
SUBTOTAL =				\$3,080.00	
Processing fee of \$130.00 for furnishing the English translation later than <input type="checkbox"/> 20 months <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)).				\$0.00	
TOTAL NATIONAL FEE =				\$3,080.00	
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.26, 3.31) \$40.00 per property				\$0.00	
TOTAL FEES ENCLOSED =				\$3,080.00	
				Amount to be refunded:	\$
				charged:	\$
a. <input type="checkbox"/> A check in the amount of \$***** to cover the above fees is enclosed. b. <input type="checkbox"/> Please charge my Deposit Account No.14-0629 in the amount of \$***** to cover the above fees. A duplicate copy of this sheet is enclosed. c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees, which may be required, or credit any overpayment to Deposit Account No. 14-0629. A duplicate copy of this sheet is enclosed. d. <input checked="" type="checkbox"/> Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. e. <input checked="" type="checkbox"/> Pursuant to 37 C.F.R. §1.136(a)(3), the Commissioner is hereby requested and authorized to treat any concurrent or future reply in the above-identified application, requiring a petition for an extension of time for its timely submission, as incorporating a petition for extension of time for the appropriate length of time.					
NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137 (a) or (b) must be filed and granted to restore the application to pending status.					
SEND ALL TO THE ADDRESS ASSOCIATED WITH: Customer No. 23859					
SIGNATURE  Lizette M. Fernandez, Ph.D. NAME 46,694 REGISTRATION NUMBER					